



CDSS

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STATE OF CALIFORNIA—HEALTH AND HUMAN SERVICES AGENCY
DEPARTMENT OF SOCIAL SERVICES
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ARNOLD SCHWARZENEGGER
GOVERNOR

IMPORTANT NOTICE

GROUP HOME AND FOSTER FAMILY AGENCY- REGIONAL CENTER BIENNIAL RATE REQUIREMENTS – AID TO FAMILIES WITH DEPENDENT CHILDREN – FOSTER CARE (AFDC-FC) PROGRAM OCTOBER 2010 FILING

Dear Provider:

In accordance with Foster Care Audits and Rates Letter (FCARL) #06-03, completion of biennial rate application is necessary for a regional center group home and/or foster family agency program to continue the use of your assigned program number.

This letter serves as a courtesy reminder that your regional center group home (GH) and/or foster family agency (FFA) biennial application/s are **due postmarked on or before October 1, 2010.**

Regional Center programs which do not submit a rate application/request by the due date shall be subject to termination of the program number. Once a program number is terminated, a new program number can only be obtained by submitting a new complete application/request.

Please use this link to access the Foster Care Rates Bureau, Biennial Rate Application Requirements website: <http://www.childsworld.ca.gov/PG1359.htm>

Please be advised that our office will be moving in September 2010. If you need assistance with your biennial rate request, please contact your rates consultant by phone or email prior to September 15, 2010. The phone numbers and email addresses are located here:

<http://www.childsworld.ca.gov/Res/pdf/ConsultantsCntyAssListconve.pdf>. After September 15, 2010, you can contact our main office number at (916) 324-4857. There will be a recorded message referring you to our new number, or you can contact your rates consultant via email. Consultants e-mail addresses will not change.

Sincerely,

NANCY LITTLEFIELD, Manager
Foster Care Rates Unit

GH/FFA-Regional Center Program Biennial Application/Request Checklist:

A complete rate application/request must be submitted for each group home-regional center program or foster family agency-regional center program in operation to continue to have a program number. A complete rate application/request is one that contains both Section 1 and Section 2 listed below. Please submit all the requested documents and indicate your program number on application/request. If you are unsure of your program number, please refer to the Foster Care Rates Listing website:
<http://www.childsworld.ca.gov/PG1343.htm#Lists>.

SECTION 1: REQUIRED FORMS

- ☐ 1.) SR 1 for GHs or FCR1FFA for FFAs;

Please ensure that you complete items# 7d and 8c on the FCR 1FFA form or items# 6c and 8b on the SR form. Information regarding foster care rates will be sent out to providers with email addresses on file. To receive updated information, please print clearly and legibly.

- ☐ 2.) FCR 16 – Group Home Shelter Costs, Self-Dealing Transactions Declaration/Survey-for Group Homes Only;

SECTION 2: REQUIRED DOCUMENTS

- ☐ 3.) Non Profit Declaration Statement: a statement signed and dated by the Board of Directors;
- ☐ 4.) Copy of all Community Care Licenses;
- ☐ 5.) List of current members of the Board of Directors. Please include names, addresses, titles, and telephone numbers;
- ☐ 6.) Franchise Tax Board or Internal Revenue Service tax exempt status letter;
- ☐ 7.) Copy of the Articles of Incorporation filed with the Secretary of State.

*PLEASE NOTE: If items #4, 6, and 7 (above) are already on file with our Department, you **do not** have to submit these documents again; however, please indicate on a cover letter that these items are on file and there have been no changes since last submission.*

GROUP HOME ONLY

- ☐ Community Care Licensing (CCL) Administrator's Certificate-if provider is waiting for certification from CCL, please submit copies of: 1.) letter to CCL, Administrator Certification Unit (ACU), 2.) Course certificates and 3.) Copy of check to ACU.
- ☐ Copy of Facility Leases/Rental Agreements-if corporation owns property, please submit copy of deed indicating corporation name on deed;
- ☐ Copy of the regional center vendorization/contractual agreement letter.

For online forms or samples please refer to the Foster Care Rates Bureau, Rate Application Requirement website located here:

<http://www.childsworld.ca.gov/PG1359.htm>

WHERE TO SEND APPLICATIONS

A complete rate application/request should be mailed to your Rates Consultant at the following address:

**CALIFORNIA DEPARTMENT OF SOCIAL SERVICES
Foster Care Audits and Rates Branch
Foster Care Rates Bureau
744 P Street, M.S. 20-74
Sacramento, CA 95814**